# Attachment 6 First Priority for Alcohol and Other Drug Abuse Treatment Services for Pregnant Women

Refer to the following pages for Attachment 6.



### State of Wisconsin \ DEPARTMENT OF HEALTH AND SOCIAL SERVICES

DIVISION OF HEALTH MAIL ADDRESS 1 WEST WILSON STREET P.O. BOX 309 MADISON, WI 53701-0309

Date: November 20, 1992

TO: AODA Coordinators

AODA Treatment Providers

Area Administrators/Assistant Area Administrators

Bureau/Office Directors-DOH/DCS

Bureau of Public Health Regional Office Directors County Departments of Community Programs Directors

County Departments of Developmental Disabilities Service Directors

County Departments of Human Service Directors County Departments of Social Service Directors

High Risk Pregnancy-AODA Projects

Local Public Health Agencies

Maternal and Child Health Funded Projects Program Office Directors/Section Chiefs

Tribal Chairpersons/Human Service Facilitators

FROM: Ann Haney, Administrator, Division of Health

Gerald Born, Administrator, Division of Community

RE: First Priority for Alcohol and Other Drug Abuse Treatment Services for

Pregnant Women

The purpose of this memo is to assure that pregnant women have first priority for alcohol and drug abuse treatment as required by law (1989 Wisconsin Act 122). Permanent rules went into effect on November 11, 1990. Attached is a signed copy of the permanent rules.

We believe that only through the collective efforts of people and organizations will we be able to prevent the devastating consequences of maternal alcohol and other drug use. As a result, it is critical that you, your staff and your colleagues in the community be fully aware of this law, and integrate it into ongoing programs and services.

According to the Task Force to Combat Alcohol and Other Drug Use by Pregnant Women and Mothers of Young Children, June, 1991, "...drug use by pregnant women is increasing. Most cases of drug use among pregnant women go undetected. As a result, substance use during pregnancy continues to be one of the most commonly missed of all obstetric and neonatal diagnoses. The widespread use of alcohol and other drugs in pregnancy and the failure to identify and treat maternal substance use contribute to high rates of infant morbidity and mortality in Wisconsin and threatens to undermine gains made by other programs to reduce these rates."

Providing first priority treatment for pregnant women is one of many important steps we can take as state and local agencies to promote healthy Wisconsin families and communities.

For further information please contact:

DHSS-Division of Health-Bureau of Public Health
Richard Aronson, MD, Maternal and Child Health Director (608) 266-5818
-or-

<u>Division of Community Services-Office of Alcohol and Drug Use</u> John Vick, Chief, (608) 266-1987

Attachment

## ORDER OF THE DEPARTMENT OF HEALIH AND SOCIAL SERVICES AMENDING AND CREATING RULES

To amend HSS 61.52(7)(b) and to create HSS 61.51(5m), relating to giving first priority for alcohol and other drug abuse (AODA) treatment services to pregnant women.

#### Analysis Prepared by the Department of Health and Social Services

Pregnant women who abuse alcohol or a prescription or over-the-counter drug or use cocaine or another illicit drug often give birth to children who have serious physical, mental or emotional problems resulting from the alcohol or drug use. Early referral of a pregnant women who has an abuse problem for treatment of that problem and then prompt treatment are important for the mother, the child and society. However, many alcohol and drug abuse (AODA) treatment facilities and agencies have waiting lists of persons seeking treatment so that at least some pregnant women referred for help with an abuse problem cannot get timely assistance.

Section 51.42(3)(ar)4m and (7)(b)7m, Stats., as created by 1989 Wisconsin Act 122, requires the Department to ensure that when there are not enough alcohol and other drug abuse (AODA) treatment services available to meet the needs of everyone eligible for those services, pregnant women are given "first priority" for receipt of those services. The Department is directed to define, by rule, what "first priority" for treatment means. This is done through this rulemaking order. "First priority" is defined in such a way that a pregnant woman assessed as needing AODA treatment services will be immediately referred to an available treatment provider and, if there is a waiting list for the services of that provider, will be placed on that waiting list immediately ahead of any person who is not entitled to "first priority" for services.

The Department's authority to amend and create these rules is found in s. 51.42(7)(b)7m, Stats., as created by 1989 Wisconsin Act 122, and s. 3023(2)(a) of 1989 Wisconsin Act 122. The rules interpret s. 51.42(3)(ar)4m and (7)(b)7m, Stats., as created by 1989 Wisconsin Act 122.

SECTION 1. HSS 61.51(5m) is created to read:

HSS 61.51(5m). "First priority for services" means that an individual assessed as needing services will be referred immediately to available treatment resources and that, in the event there is a waiting list for any treatment resource, will be placed on the waiting list immediately before any person not entitled to first priority for services.

SECTION 2. HSS 61.52(7)(b) is amended to read:

HSS 61.52(7)(b). Criteria for determining the eligibility of individuals for admission shall be clearly stated in writing, with first priority for services given to pregnant women who are alcohol or drug abusers.

The rules contained in this order shall take effect on the first day of the month following publication in the Wisconsin Administrative Register as provided in s. 227.22(2), Stats.

Wisconsin Department of Health and Social Services

Date: September 10, 1990

Patricia A. Goodrich

Secretary

SEAL: